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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Michael First name D Middle name	Jillian First name A Middle name
	Bring your picture identification to your meeting with the trustee.	Plaminek Last name and Suffix (Sr., Jr., II, III)	Plaminek Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1885	xxx-xx-9387

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Debtor 1 Michael D Plaminek
Debtor 2 Jillian A Plaminek

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	404 Plum	If Debtor 2 lives at a different address:
		Lake in the Hills, IL 60156 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		McHenry	County
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Michael D Plaminek Jillian A Plaminek	Document	Case number (if known)	

7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	■ CI	hapter 7			
		_	hapter 11 hapter 12			
			hapter 13			
			napto. 10			
8.	How you will pay the fee		about how yo	ou may pay. Typio attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for more deta urself, you may pay with cash, cashier's check, or mor alf, your attorney may pay with a credit card or check w
		I need to pay the fee in installments. If you choose this option, sign a The Filing Fee in Installments (Official Form 103A).				
			J		,	only if you are filing for Chapter 7. By law, a judge ma
			but is not req	uired to, waive your family size and	our fee, and may do so only if you d you are unable to pay the fee in	ur income is less than 150% of the official poverty line installments). If you choose this option, you must fill cial Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	■ No				
	iast o years?	ЦYe	es. District		When	Case number
			District		When	Case number Case number
			District	-	When	0
			DISTRICT		vviieii	Case number
10.	Are any bankruptcy cases pending or being	■ No)		_	
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	·S.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your	■ No	Go to	ine 12.		
	residence?	□ Ye	es. Has yo	our landlord obtai	ned an eviction judgment agains	t you and do you want to stay in your residence?
		. •	_	No. Go to line 1	3	
				No. Go to line i	۷.	

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Debt Debt			Case number (if known)
	_		
Part	3: Report About Any Bu	ısinesses	You Own as a Sole Proprietor
	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.
		☐ Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(53A))
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of the above
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s., cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).
	For a definition of small	■ No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.	
	property that poses or is alleged to pose a threat	☐ Yes.	
	of imminent and identifiable hazard to public health or safety?	— 100.	What is the hazard?
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property? Number, Street, City, State & Zip Code
			, 2, 2, 2, 2000

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Debtor 1 Michael D Plaminek
Debtor 2 Jillian A Plaminek

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-81001 Doc 1 Filed 04/22/16 Entered 04/22/16 17:18:40 Desc Main Document Page 6 of 62

	otor 2 Jillian A Plaminek				Case numb	ber (if known)		
Par	Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily co individual primarily for a personal primari			efined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you or	we that are not consume	er debts or busin	ess debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Dare paid that funds will be ava			pperty is excluded and administrative expenses s?		
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000		
	you estimate that you owe?	□ 50-99	,	☐ 5001-10,000	_	☐ 50,001-100,000		
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	J	☐ More than100,000		
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 - \$		□ \$500,000,001 - \$1 billion		
	be worth?		001 - \$100,000 ,001 - \$500,000	□ \$10,000,001 - □ \$50,000,001 -		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			,001 - \$300,000 ,001 - \$1 million	□ \$100,000,001		☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$	•	<u> </u>		□ \$500,000,001 - \$1 billion		
	to be?	_ ` `	001 - \$100,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001		☐ More than \$50 billion		
Par	t 7: Sign Below		· · ·					
	you	I have ev	vamined this netition, and I dec	lare under penalty of pe	riury that the info	ormation provided is true and correct.		
. 0.	you		•	, , ,		·		
						e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.		
			orney represents me and I did n nt, I have obtained and read the			not an attorney to help me fill out this		
		I request	t relief in accordance with the c	chapter of title 11, United	l States Code, sp	pecified in this petition.		
			tcy case can result in fines up to			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Mich	nael D Plaminek		/s/ Jillian A Pla			
			I D Plaminek e of Debtor 1		Jillian A Plami Signature of Deb			
		Executed	d on April 22, 2016	J	Executed on A	pril 22, 2016		
			MM / DD / YYYY		M	M / DD / YYYY		

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Debtor 1	Michael D Plaminek
Debtor 2	Jillian A Plaminek

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stephe	n S. Newland	Date	April 22, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Stephen S	S. Newland		
Printed name			
Newland 8	& Newland, LLP		
irm name			
1512 Artai	us Parkway, Ste. 300		
Libertyvill	e, IL 60048		
Number, Street,	City, State & ZIP Code		
Contact phone	(847) 549-0000	Email address	steve@newlandlaw.com
6207458			
Rar number & S	tate		

		17(1(.11111)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Michael D Plamin	ek		
	First Name	Middle Name	Last Name	
Debtor 2	Jillian A Plaminel	K		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
(ii kilowii)				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	100,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,300.56
	1c. Copy line 63, Total of all property on Schedule A/B	\$	116,300.56
Pa	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	113,367.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,362.3
	Your total liabilities	\$	148,729.34
Pa:	Summarize Your Income and Expenses		
ŀ.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,706.67
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,277.66
Pa:	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

		Document	Page 9 of 62	
	Michael D Plaminek		•	
Debtor 2	Jillian A Plaminek		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$_	4,919.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Cas	e 16-8100	1 Doc 1	Filed 04/22/ Document		6 17:18:40	Desc Main
Fill	in this informa	ation to identify	your case and th				
Deb	otor 1	Michael D Pl	laminek				
		First Name		Name	Last Name		
	otor 2 use, if filing)	Jillian A Plan		Name	Last Name		
Unit	ted States Bank	cruptcy Court for	the: NORTHER	N DISTRICT OF	ILLINOIS		
Cas	se number						☐ Check if this is an
							amended filing
n ea hink nfor Answ	chedule ch category, sep it fits best. Be a mation. If more s ver every question	as complete and a space is needed, a on.	roperty escribe items. List accurate as possible attach a separate sl	e. If two married p neet to this form. (e. If an asset fits in more than one eople are filing together, both are On the top of any additional pages,	equally responsible	for supplying correct
Part	11: Describe Ea	nch Residence, B	uilding, Land, or Ot	her Real Estate Yo	ou Own or Have an Interest In		
l. De	o you own or hav	ve any legal or eq	uitable interest in a	ny residence, buil	ding, land, or similar property?		
	No. Go to Part 2						
1.1				What is the pro	perty? Check all that apply		
	404 Plum St	treet		-	mily home	Do not deduct secui	red claims or exemptions. Put
	Street address, if a	available, or other des	cription	ш .	r multi-unit building inium or cooperative	the amount of any s	ecured claims on Schedule D: e Claims Secured by Property.
	Lake in the	Hills IL	60156-0000	☐ Manufac☐ Land	tured or mobile home	Current value of th entire property?	e Current value of the portion you own?
	City	State	ZIP Code	_	ent property	\$100,000.	\$100,000.00
				_	erest in the property? Check one	(such as fee simple a life estate), if kno	
	McHenry			☐ Debtor 1 ☐ Debtor 2	•	Tenancy by the	e Entirety
	County				and Debtor 2 only	01 - 1 - 1 - 1 - 1 - 1	
				☐ At least of	one of the debtors and another	(see instructions)	s community property
					ion you wish to add about this iten fication number:	n, such as local	
					s \$139K and Assessor Values and listings that propert		
2.	Add the dollar	value of the po	ortion you own fo	r all of your entr	ies from Part 1, including any	entries for	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$100,000.00

Document Page 11 of 62 Michael D Plaminek Debtor 1 Jillian A Plaminek Debtor 2 Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Mini Cooper 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: S Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the 52000 Approximate mileage: portion you own? Debtor 1 and Debtor 2 only entire property? Other information: At least one of the debtors and another \$10.050.00 \$10,050.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$10.050.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Customary Furniture, Furnishings, Appliances, Kitchenware, \$1,000.00 Household goods and sundries 2 old Televisions, peripherals standard audio. Customary home \$500.00 electronics. Computer and printer. \$100.00 Yard maintenance equipment 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Official Form 106A/B Schedule A/B: Property page 2

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Desc Main

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Michael D Plaminek Jillian A Plaminek

Yes. Describe.....

10. Firearms	Treadmill and eliptical \$150.00, 8 year old Canon Camera 50.00	\$200.00
■ No □ Yes. Describe	es, shotguns, ammunition, and related equipment	
11. Clothes Examples: Everyday □ No	clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe		
	Usual and Necessary Wearing Apparel	\$300.00
12. Jewelry Examples: Everyday □ No ■ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go	old, silver
	Wedding bands. Costume jewelry. No other precious metals or gemstones	\$215.00
4. Any other personal a	Domestic pet dogs (4), no show, breeding or resale value. nd household items you did not already list, including any health aids you did not list	\$0.00
■ No □ Yes. Give specific		
— 100. One opecine	F	
15. Add the dollar valu	e of all of your entries from Part 3, including any entries for pages you have attached t number here	\$2,315.00
15. Add the dollar valu	t number here	\$2,315.00
15. Add the dollar value for Part 3. Write the Part 4: Describe Your Fin.	t number here	\$2,315.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
15. Add the dollar value for Part 3. Write that Part 4: Describe Your Find Do you own or have any 16. Cash Examples: Money you No	ncial Assets	Current value of the portion you own? Do not deduct secured claims or exemptions.
15. Add the dollar value for Part 3. Write that Part 4: Describe Your Find Do you own or have any 6. Cash Examples: Money you No	Incial Assets legal or equitable interest in any of the following? I have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	Current value of the portion you own? Do not deduct secured claims or exemptions.

■ Yes...... Institution name:

Entered 04/22/16 17:18:40 Desc Main Case 16-81001 Doc 1 Filed 04/22/16 Document Page 13 of 62 **Michael D Plaminek** Debtor 1 Debtor 2 Jillian A Plaminek Case number (if known)

		17.1.	Checking #8218	Chase	\$822.10
		17.2.	Savings #7835	Chase	\$25.94
		17.3.	Checking #2582	BMO Harris	\$0.00
		17.4.	Checking #3012	Chase	\$3,047.52
	Bonds, mutual funds, Examples: Bond funds ■ No □ Yes	-	-	erage firms, money market accounts	
19.	joint venture	tock and	interests in incorpora	ted and unincorporated businesses, including an interest in	n an LLC, partnership, and
	■ No □ Yes. Give specific in		about themme of entity:	% of ownership:	
	Negotiable instruments	s include nents are ormation	personal checks, cashie those you cannot trans	ble and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them.	
21.	Retirement or pension Examples: Interests in			(b), thrift savings accounts, or other pension or profit-sharing pla	ans
	☐ Yes. List each accoun		tely. of account:	Institution name:	
22.	Examples: Agreements	ed deposi	ts you have made so th	at you may continue service or use from a company blic utilities (electric, gas, water), telecommunications companie	s, or others
	■ No □ Yes			Institution name or individual:	
23.	Annuities (A contract fo	or a perio	odic payment of money t	to you, either for life or for a number of years)	
		suer nan	ne and description.		
	Interests in an educati 26 U.S.C. §§ 530(b)(1), ■ No			lified ABLE program, or under a qualified state tuition progr	am.
		stitution	name and description. S	Separately file the records of any interests.11 U.S.C. § 521(c):	
	■ No			er than anything listed in line 1), and rights or powers exerc	isable for your benefit
	☐ Yes. Give specific in	rormation	about them		
				other intellectual property from royalties and licensing agreements	

Official Form 106A/B Schedule A/B: Property page 4 Software Copyright (c) 1996-2016 Best Case, LLC - www.bestcase.com Best Case Bankruptcy

 $\hfill\square$ Yes. Give specific information about them...

			Document	Page 14 of 62		
Debto Debto		Michael D Plaminek Jillian A Plaminek		_	ase number (if known)	
E	Exampl No	s, franchises, and other general es: Building permits, exclusive li	censes, cooperative association	n holdings, liquor license	es, professional licens	es
Mone	ey or p	roperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	inds owed to you Give specific information about the	nem, including whether you alre	eady filed the returns and	I the tax years	
			2015 taxes filed and refu		Federal and Sta	nte \$0.00
<i>E</i>	Exampl No	support es: Past due or lump sum alimo	ny, spousal support, child supp	ort, maintenance, divorc	e settlement, property	settlement
■	Exampl No	mounts someone owes you es: Unpaid wages, disability insu benefits; unpaid loans you n Give specific information		nefits, sick pay, vacation	pay, workers' comper	nsation, Social Security
<i>E</i>	Exampl No	s in insurance policies es: Health, disability, or life insu	-	(HSA); credit, homeowne	er's, or renter's insurar	nce
	Yes. N	lame the insurance company of Company		Beneficiary	<i>r</i> :	Surrender or refund value:
If s ■	you a omeor No	erest in property that is due your the beneficiary of a living trus has died. Give specific information	ou from someone who has di t, expect proceeds from a life in	ed nsurance policy, or are c	urrently entitled to rece	eive property because
E	Exampl No	against third parties, whether es: Accidents, employment disp			or payment	
	No	ontingent and unliquidated cla	aims of every nature, includir	g counterclaims of the	edebtor and rights to	set off claims
	No	ancial assets you did not alrea	dy list			
		ne dollar value of all of your en rt 4. Write that number here				\$3,935.56
					· ·	

Official Form 106A/B Schedule A/B: Property page 5

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 16-81001 Doc 1 Filed 04/22/16 Entered 04/22/16 17:18:40 Desc Main Page 15 of 62 Document Michael D Plaminek Debtor 1 Jillian A Plaminek Case number (if known) Debtor 2 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$100,000.00 56. Part 2: Total vehicles, line 5 \$10,050.00 57. Part 3: Total personal and household items, line 15 \$2,315.00 Part 4: Total financial assets, line 36 58. \$3,935.56 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$16,300.56 Copy personal property total \$16,300.56

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$116,300.56

		17(7(7))	1 11111: 177 177		
Fill in this infor	mation to identify your	case:			
Debtor 1	Michael D Plamin	ek			
	First Name	Middle Name	Last Name		
Debtor 2	Jillian A Plaminel	k			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming?	? Check one only	, even if	your spouse is filin	g with	you.
----	-----------------------------	---------------	------------------	-----------	----------------------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Customary Furniture, Furnishings, Appliances, Kitchenware, Household	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
goods and sundries Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
2 old Televisions, peripherals standard audio. Customary home	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
electronics. Computer and printer. Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit		
Yard maintenance equipment Line from Schedule A/B: 6.3	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
Line nom Schedule A.B. 4.3			100% of fair market value, up to any applicable statutory limit		
Treadmill and eliptical \$150.00, 8 year old Canon Camera 50.00	\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit		
Usual and Necessary Wearing Apparel	\$300.00		\$300.00	735 ILCS 5/12-1001(a)	
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		

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Michael D Plaminek Debtor 1 Jillian A Plaminek Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding bands. Costume jewelry. 735 ILCS 5/12-1001(b) \$215.00 \$215.00 No other precious metals or gemstones 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit Domestic pet dogs (4), no show, 735 ILCS 5/12-1001(b) \$0.00 \$0.00 breeding or resale value. Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$40.00 \$40.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking #8218: Chase 735 ILCS 5/12-1001(b) 100% \$822.10 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings #7835: Chase 735 ILCS 5/12-1001(b) 100% \$25.94 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking #2582: BMO Harris 735 ILCS 5/12-1001(b) 100% \$0.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Checking #3012: Chase 735 ILCS 5/12-1001(h)(4) \$3,047.52 \$3,047.52 Line from Schedule A/B: 17.4 П 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Ar	eу	ou cl	aimin	ıg a l	home	stea	d ex	empt	ion of	more	thai	า \$1	60,3	75?

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No П

Yes

			Document	Page 18	3 of 62		
Filli	n this informati	on to identify you	r case:				
Deb	tor 1	Michael D Plam	inek				
DCD		First Name	Middle Name	Last Name			
Deb	tor 2	Jillian A Plamin	ek				
	_	irst Name	Middle Name	Last Name			
Unit	ed States Bankri	ptcy Court for the:	NORTHERN DISTRICT OF II	LINOIS			
Ornic	ca Claics Barillia	iptoy Court for the.					
	e number						
(if kno	own)						if this is an
	<u> </u>					amend	ed filing
∩ffi	cial Form 1	06D					
			Marie I I and Oladana	0			
SC	nedule D:	Creditors	Who Have Claims	Secure	a by Property	<u>y </u>	12/15
is nee	eded, copy the Ad		If two married people are filing toge out, number the entries, and attach				
	er (if known).	e claims secured by	vyour proporty?				
		•	, , , ,	b b	and have a soft to a star of	and the factor	
	No. Check this	s box and submit ti	his form to the court with your other	er schedules. Y	ou have nothing else to	o report on this form.	
	Yes. Fill in all	of the information	below.				
Part	1: List All Se	ecured Claims					
2. Lis	st all secured clair	ms. If a creditor has r	more than one secured claim, list the c	reditor separately	, Column A	Column B	Column C
for ea	ach claim. If more	than one creditor has	a particular claim, list the other creditor	ors in Part 2. As	Amount of claim	Value of collateral	Unsecured
mucr	i as possible, list th	e ciaims in aipnabetii	cal order according to the creditor's na	me.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Bmw Financi	ial Services	Describe the property that secure	s the claim:	\$10,884.00	\$10,050.00	\$834.00
	Creditor's Name		2012 Mini Cooper S 52000	miles			
	Attn: Bankru	ptcy					
	Department		As of the date you file, the claim is	S: Check all that			
	Po Box 3608 Dublin, OH 4	3016	apply.				
			☐ Contingent				
	Number, Street, City	, State & Zip Code	Unliquidated				
Who	owes the debt?	Check one	☐ Disputed Nature of lien. Check all that apply	,			
_	ebtor 1 only	Chlock Gho.	_		d		
_	ebtor 2 only		An agreement you made (such a car loan)	s mortgage or sec	curea		
_	ebtor 2 only bebtor 1 and Debtor	· 2 only	☐ Statutory lien (such as tax lien, m	ochanic's lian)			
_	t least one of the d	•	☐ Judgment lien from a lawsuit	lecharile's lierry			
	heck if this claim		Other (including a right to offset)				
	community debt		Tanan (manaanig arrigin ta array)				
		Opened					
		3/26/12					
		Last Active					
Date	debt was incurred	2/18/16	Last 4 digits of account nu	mber 1916			
2.2	Nationstar M	ortgage LLC	Describe the property that secure	s the claim:	\$102,483.00	\$100,000.00	\$2,483.00
	Creditor's Name		404 Plum Street Lake in the	e Hills, IL			
			60156 McHenry County				
			Zillow value \$139K and As Value \$90,290. Debtors be				
			based on local sales and li				
			that property would not ex				
	8950 Cypres	s Waters	\$100,000.				
	Blvd		As of the date you file, the claim is	Check all that			
	Coppell, TX 7	75019	apply. Contingent				
	Number, Street, City		☐ Unliquidated				
		•	☐ Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that apply	<u>'.</u>			

Debtor 1 only

 $\hfill \Box$ An agreement you made (such as mortgage or secured car loan)

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Debtor 1	tor 1 Michael D Plaminek			Case number (if know)		
-	First Name	Middle Na	ame Last Name		_	
Debtor 2	Jillian A P	laminek				
-	First Name	Middle Na	ame Last Name			
Debtor 1	1 and Debtor 2	only	☐ Statutory lien (such as tax li	en, mechanic's lien)		
☐ At least	one of the deb	tors and another	☐ Judgment lien from a lawsu	t		
	f this claim re unity debt	elates to a	Other (including a right to o	fset)		
Date debt v	was incurred	Opened 2/01/12 Last Active 2/03/16	Last 4 digits of accour	nt number 3812	2	
						7
		•	olumn A on this page. Write th		\$113,367.00]
	the last page of the state of t	•	the dollar value totals from all	pages.	\$113,367.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

00	200 IO 01001 D	Document	Page 20 of 62	Description
Fill in this infor	mation to identify your ca			
Debtor 1	Michael D Plamine	,		
Debior 1	First Name	Middle Name	Last Name	
Debtor 2	Jillian A Plaminek			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS	
Case number(if known)				☐ Check if this is an amended filing
Official Forr	m 106F/F			
		no Have Unsecured	1 Claims	12/15
			ITY claims and Part 2 for creditors with NONPF	
Schedule D: Credi eft. Attach the Con name and case nu	tors Who Have Claims Secur	red by Property. If more space is . If you have no information to re	Do not include any creditors with partially sec s needed, copy the Part you need, fill it out, nu report in a Part, do not file that Part. On the top	mber the entries in the boxes on the
1. Do any credit	ors have priority unsecured	claims against you?		
No. Go to I	Part 2.			
☐ Yes.				
Part 2: List A	All of Your NONPRIORITY	Unsecured Claims		
3. Do any credit	ors have nonpriority unsecu	red claims against you?		
☐ No. You ha	ave nothing to report in this par	t. Submit this form to the court wit	th your other schedules.	
Yes.				
unsecured cla	im, list the creditor separately f	or each claim. For each claim liste	the creditor who holds each claim. If a creditor led, identify what type of claim it is. Do not list claim a have more than three nonpriority unsecured clair	ns already included in Part 1. If more
2.				Total claim
4.1 Advoca	ate Good Shepard Hos	pital Last 4 digits of ac	count number	\$1,282.00
Nonpriori	ty Creditor's Name est Hwy 22	When was the del	bt incurred?	
	gton, IL 60010	A control of the control		
	Street City State Zlp Code urred the debt? Check one.	As of the date you	u file, the claim is: Check all that apply	
Debto		П.		
☐ Debto	•	Contingent		
_	-	☐ Unliquidated		
	or 1 and Debtor 2 only	☐ Disputed	DITY	
	st one of the debtors and anoth		ORITY unsecured claim:	
☐ Checl debt	k if this claim is for a comm			
	nim subject to offset?	☐ Obligations aris report as priority cla	sing out of a separation agreement or divorce that aims	you aid not
■ No		☐ Debts to pension	on or profit-sharing plans, and other similar debts	
☐ Yes		Other Specify	Medical services	

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Debte	or 2 Jillian A Plaminek	Case number (if know)				
4.2	Advocate Medical Group Nonpriority Creditor's Name	Last 4 digits of account number		\$262.00		
	701 Lee St. Des Plaines, IL 60016	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical set				
4.3	Calvary Portfolio Services	Last 4 digits of account number	0776	\$1,930.00		
	Nonpriority Creditor's Name 500 Summit Lake Dr Ste 400	onpriority Creditor's Name 00 Summit Lake Dr When was the debt incurred?				
	Valhalla, NY 10595					
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify 08 Synchro	ny Bank			
4.4	Capital One	Last 4 digits of account number	2107	\$2,766.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 3/01/08 Last Active 9/14/15			
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	O continuent				
		☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	At least one of the debtors and another					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card				
		-				

Debtor 1 Michael D Plaminek

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Case number (if know) Debtor 2 Jillian A Plaminek 4.5 **Capital One** Last 4 digits of account number 7207 \$1,196.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/01/11 Last Active 9/14/15 Po Box 30285 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.6 Carecr/gemb Last 4 digits of account number Unknown Nonpriority Creditor's Name ATTN: Bankruptcy When was the debt incurred? PO Box 103104 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Care credit dental ☐ Yes 4.7 Cda/pontiac Last 4 digits of account number 4325 \$142.00 Nonpriority Creditor's Name Attn:Bankruptcy Opened 10/01/13 When was the debt incurred? Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Wellington Radiology** ■ Other. Specify Group Sc ☐ Yes

Debtor 1 Michael D Plaminek

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Debtor Debtor	1 Michael D Plaminek 2 Jillian A Plaminek		Case number (if know)	
4.8	Creditors Protection S	Last 4 digits of account number	3998	\$12,648.00
	Nonpriority Creditor's Name Po Box 4115 Rockford, IL 61101	When was the debt incurred?	Opened 12/01/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Specialists	Attorney Premier Pain	
4.9	Dr Luda M Sorin Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	1675 Dempster Street 3rd floor Park Ridge, IL 60068	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Medical set not in. At I	rvices for daughter. All billings east 6,000	
4.1	Illinois Collection Se	Last 4 digits of account number	6355	\$341.00
	Nonpriority Creditor's Name 8231 185th St Ste 100 Tinley Park, IL 60487	When was the debt incurred?	Opened 9/01/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection Group Olr	Attorney Resurrection Medical	

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Debtor 2 Jillian A Plaminek			Case number (if know)		
4.1	Joseph F Antolak DDS	Last 4 digits of account number		\$765.00	
	Nonpriority Creditor's Name 370 Liberty Road	When was the debt incurred?	4/20/2016		
	Crystal Lake, IL 60014 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	,		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes		Dental Services done on eve s. See statement of intentions		
4.1	Kohls/Capital One	Last 4 digits of account number	5097	\$1,262.00	
	Nonpriority Creditor's Name		Opened 11/01/11 Last Active		
	Po Box 3120 Milwaukee, WI 53201	When was the debt incurred?	6/27/13		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Charge Acc	count		
4.1	Lutheran General Hospital	Last 4 digits of account number		Unknown	
	Nonpriority Creditor's Name **Mealthport**	When was the debt incurred?			
	PO Box 409900				
	Atlanta, GA 30384-9900				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	П			
	Debtor 2 only	☐ Contingent			
	<u> </u>	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans	u viaiill.		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did hot		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical se	rvcies for daguther unknown.		

Debtor 1 Michael D Plaminek

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Debtor Debtor	1 Michael D Plaminek 2 Jillian A Plaminek		Case number (if know)	
4.1 4	Med Business Bureau	Last 4 digits of account number	0002	\$160.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068	When was the debt incurred?	Opened 12/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Emergency	Attorney Med1 02 Tricounty Physicia	
4.1 5	Med Business Bureau	Last 4 digits of account number	0004	\$105.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 9/01/13	
	Park Ridge, IL 60068 Number Street City State Zlp Code	As of the date you file, the claim	in Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Спеск ан так арргу	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	■ Other. Specify Collection Emergency	Attorney Med1 02 Tricounty Physicia	
4.1	Med Business Bureau	Last 4 digits of account number	0001	\$50.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 4/01/12	
	Park Ridge, IL 60068 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Collection Collection Collection	Attorney Med1 02 Tricounty Physicia	

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Debtor Debtor	1 Michael D Plaminek 2 Jillian A Plaminek		Case number (if know)	
4.1 7	Med Business Bureau	Last 4 digits of account number	0003	\$50.00
	Nonpriority Creditor's Name 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068	When was the debt incurred?	Opened 5/01/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify	Attorney Med1 02 Tricounty Physicia	
4.1 8	Med Business Bureau Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$50.00
	1460 Renaissance Dr Suite 400	When was the debt incurred?	Opened 5/01/12	
	Park Ridge, IL 60068 Number Street City State Zlp Code	As of the date you file, the claim i	s. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only			
	Debtor 1 and Debtor 2 only	☐ Unliquidated		
		☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	At least one of the debtors and another	Student loans	a oldiiii.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Emergency	Attorney Med1 02 Tricounty Physicia	
4.1	Merchants Credit	Last 4 digits of account number	2115	\$126.00
	Nonpriority Creditor's Name 223 W Jackson Blvd Ste 700	When was the debt incurred?	Opened 9/01/14	
	Chicago, IL 60606 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Пол		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciann:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	— INU	·	Attorney Midwest Imaging	
	☐ Yes	Other. Specify Profession		

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Debto	or 2 Jillian A Plaminek		Case number (if know)	
4.2	Midland Funding	Last 4 digits of account number	4662	\$991.00
	Nonpriority Creditor's Name 2365 Northside Dr Suite 300	When was the debt incurred?	Opened 8/01/14	
	San Diego, CA 92108			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	<u> </u>	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	o plans, and other similar debts	
	■ NO		Company Account Synchrony	
	Yes	Other. Specify Bank		
4.2	Midland Funding	Last 4 digits of account number	8089	\$454.00
	Nonpriority Creditor's Name			· .
	2365 Northside Dr	When was the debt incurred?	Opened 7/01/15	
	Suite 300			
	San Diego, CA 92108 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
		<u> </u>		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure		
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	<u> </u>	Debts to pension or profit-sharir		
	■ No	_ Factoring (Company Account Synchrony	
	☐ Yes	Other. Specify Bank		
4.2	MIRA Med Revenue Nonpriority Creditor's Name	Last 4 digits of account number	7024	\$816.62
	Sept. 77304	When was the debt incurred?	12/14	
	PO Box 7700			
	Detroit, MI 48277	_		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Hospital	rvices collecting for Sherman	

Debtor 1 Michael D Plaminek

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Debto	or 2 Jillian A Plaminek		Case number (if know)		
4.2 3	Moraine ER Physicians Nonpriority Creditor's Name	Last 4 digits of account number		\$1,090.00	
	PO Box 8759	When was the debt incurred?	12/10		
	Philadelphia, PA 19101 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts		
	☐ Yes	■ Other Specify Medical se			
1.2 1	Personal Finance/p312	Last 4 digits of account number	6501	\$3,360.00	
	Nonpriority Creditor's Name	_	Opened 10/01/15 Leet Active		
	1022 S. Mclean Blvd Elgin, IL 60123	When was the debt incurred?	Opened 10/01/15 Last Active 2/17/16		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts		
	Yes	Personal Ic interest bu	oan. Debtor claims security t not perfected.		
			<u> </u>		
4.2 5	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number	7205	\$2,305.00	
	Attn: Bankruptcy Po Box 41067	When was the debt incurred?	Opened 11/01/15		
	Norfolk, VA 23541	_			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	d claim:			
	☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	□Yes	■ Other. Specify Financial N	Company Account World letwork Bank		

Debtor 1 Michael D Plaminek

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Portfolio Recovery Creditor's Name Aftr: Bankruptcy Po Box 41067 Norfolk, VA 23541 Number Street City State 2 Code When house the debt incurred? Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk, VA 23541 Number Street City State 2 Code Opened 9/01/15 Norfolk City City City City City City City City	Debtor Debtor	1 Michael D Plaminek 2 Jillian A Plaminek		Case number (if know)	
Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 Number Street City State 2/p Code Who incurred the deth? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only 1 only Debtor 9 only 1 only Debtor 1 only Debto		<u> </u>	Last 4 digits of account number	5906	\$1,455.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Unliquidated Debtor 2 only Unliquidated Debtor 2 only Unliquidated Debtor 2 only Unliquidated Debtor 3 only Unliquidated Debtor 4 only Unliquidated Debtor 5 only Unliquidated Debtor 5 only Unliquidated Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only 3 only 3 only 3 only 4		Attn: Bankruptcy Po Box 41067	When was the debt incurred?	Opened 9/01/15	
Debtor 2 only Destion 1 and Debtor 3 only Disputed		Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
At least one of the debtors and another Check if this claim is for a community debt Student leans Student leans Check if this claim subject to offset? Season Content Specify Factoring Company Account Citibank N.A. 4.2			_		
Is the claim subject to offset? No		☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans		
Ves		_	report as priority claims	,	
Portrollor Recovery Last 4 digits of account number 2391 \$803.00		_	, ,	01 ,	
Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 6 debt of the debtors and another Check if this claim is for a community debt Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Deb		_	Last 4 digits of account number	2591	\$803.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		Attn: Bankruptcy Po Box 41067	When was the debt incurred?	Opened 4/01/15	
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts TSI Other. Specify Factoring Company Account Citibank N.A. TSI Nonpriority Creditor's Name Po Box 15630 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? In No Debts to pension or profit-sharing plans, and other similar debts As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Factoring Company Account Citibank N.A. TSI		_			
debt Sthe claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Yes		At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
TSI Nonpriority Creditor's Name PO Box 15630 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debts Other. Specify Factoring Company Account Citibank N.A. 4842 \$526.00 Opened 4/01/15 Opened 4/01/15 As of the date you file, the claim is: Check all that apply Vho incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
TSI Nonpriority Creditor's Name Po Box 15630 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Last 4 digits of account number 4842 S526.00 When was the debt incurred? Opened 4/01/15 As of the date you file, the claim is: Check all that apply Check all that apply Type of NonPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
Solution		∐Yes	■ Other. Specify Factoring (Company Account Citibank N.A.	
When was the debt incurred? Opened 4/01/15 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? Opened 4/01/15 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			Last 4 digits of account number	4842	\$526.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Po Box 15630	When was the debt incurred?	Opened 4/01/15	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zlp Code Who incurred the debt? Check one.	_	s: Check all that apply	
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_	_		
debt Is the claim subject to offset? No Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		_	•	d claim:	
		debt	Obligations arising out of a separeport as priority claims	,	
		_	·	•	

Debto	Case 16-81001 Doc 1	Filed 04/22/16 Entere Document Page 3	ed 04/22/16 17:18:40 Desc M 0 of 62	lain
	r 2 Jillian A Plaminek		Case number (if know)	
4.2 9	TSI	Last 4 digits of account number	4867	\$260.00
	Nonpriority Creditor's Name Po Box 15630 Wilmington DE 10950	When was the debt incurred?	Opened 4/01/15	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only			
	_	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plane, and other similar debts	
	☐ Yes	· · ·	Attorney Quest Diagnostics	
4.3	TO.		4000	4400.00
0	TSI Nonpriority Creditor's Name	Last 4 digits of account number	<u>1203</u>	\$123.00
	Po Box 15630	When was the debt incurred?	Opened 5/01/15	
	Wilmington, DE 19850		<u> </u>	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Quest Diagnostics	
4.3	Wellington Radiology			\$43.72
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ-3.72
	9410 Compubill Dr. Orland Park, IL 60462	When was the debt incurred?	9/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Medical services

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Michael D Plaminek	Document rage	31 01 02				
Debtor 2 Jillian A Plaminek		Case number (if know)				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Central Credit Services	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 15118 Jacksonville, FL 32239-5118		Part 2: Creditors with Nonpriority Unsecured Claims				
Jacksonvine, FL 32239-3110	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
ICS	Line 4.31 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 1010 Tinley Park, IL 60477		Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Malcom S. Gerald and Assoc., Inc.	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
332 South Michigan Ave., Ste. 600 Chicago, IL 60604		Part 2: Creditors with Nonpriority Unsecured Claims				
omeago, in occup	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
QCS	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
POB 4699 Petaluma, CA 94955		Part 2: Creditors with Nonpriority Unsecured Claims				
retatuma, CA 94933	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did					
Shindler Law	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
1990 East Algonquin Road - Suite 18 Schaumburg, IL 60173		Part 2: Creditors with Nonpriority Unsecured Claims				
Condambary, IL Corro	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
State Collection Service	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
2509 S Stoughton Rd Madison, WI 53716		Part 2: Creditors with Nonpriority Unsecured Claims				
madicon, Wi our io	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims	Oi.	Student Ioans	Oi.	Φ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	35,362.34
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	35,362.34

		1706000		
Fill in this infor	mation to identify your	case:		
Debtor 1	Michael D Plamin	nek		
	First Name	Middle Name	Last Name	
Debtor 2	Jillian A Plamine	k		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(ii Kilowii)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	AT&T Mobility PO Box 6428 Carol Stream, IL 60197-6428	Cell phone contract through Feb 2018
2.2	Banfeld Veterinary 4465 US Hwy 14 Crystal Lake, IL 60014	Veterinary plan at \$65/month through March 2017
2.3	Dish Network 9601 S Meridian Englewood, CO 80112	Satellite services through November 2015

		Docume	ent <u>Page 33 c</u>	ot 62	
Fill in this	information to identify your	case:			
Debtor 1	Michael D Plamir	nole.			
Depioi i	First Name	Middle Name	Last Name		
Debtor 2	Jillian A Plamine	k			
(Spouse if, fill		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
•					
Case num	Der			Г	Check if this is an
,				"	amended filing
					5
Officia	l Form 106H				
		ab4a#a			
<u>Scnec</u>	lule H: Your Cod	eptors			12/15
				as a codebtor.	
		. lived in a community n		ne? (Community proporty otatoo or	ad tarritariaa in aluda
	na, California, Idaho, Louisiana			ry? (Community property states an ington, and Wisconsin.)	id territories include
=	0				
	. Go to line 3.				
⊔ Ye:	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you sure you have listed the credito 06G). Use Schedule D, Schedule	r on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to w Check all schedules that app	-
2.4				Cabadula D. Saa	
3.1	Name			Schedule D, line	
				Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street				
	City	State	ZIP Code		
3.2	Namo			Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	_		_	
	City	State	ZIP Code		

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Fill in this informat	ion to identify your case:	
Debtor 1	Michael D Plaminek	
Debtor 2 (Spouse, if filing)	Jillian A Plaminek	
United States Ban	kruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Fo		MM / DD/ YYYY
Schedule	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ☐ Not employed ■ Not employed information about additional employers. Occupation **Acrylic Fabricator Admin Assistant** Include part-time, seasonal, or **Total Systems Roofing** self-employed work. **Employer's name Loop Acrylics Employer's address** Occupation may include student 3550 W Knox Ave 111 Erick Street Unit #111 or homemaker, if it applies. Chicago, IL 60641 Crystal Lake, IL 60014 How long employed there? 10 years 1 year

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,100.00 1,475.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 3,100.00 1,475.00

Official Form 106I Schedule I: Your Income page 1

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Debte Debte		Michael D Plaminek Jillian A Plaminek	_		Case	number (if know	7)				
					For	r Debtor 1			Debtor 2 filing sp		
	Cop	by line 4 here	4.		\$	3,100.0	0	\$		75.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	589.0	0	\$	2	236.00	
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$	0.0		\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	.	\$	0.0	0	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.0	0	\$		0.00	
	5e.	Insurance	56		\$_	0.0		\$		43.33	_
	5f.	Domestic support obligations	5f		\$_	0.0	_	\$		0.00	_
	5g.	Union dues	50	-	\$_	0.0				0.00	_
•	5h.	Other deductions. Specify:	_	1.+	\$_ •	0.0	_			0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	589.0		\$		279.33	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,511.0	0	\$	1,1	95.67	—
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$_	0.0		\$		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8k	ο.	\$_	0.0	<u>U</u>	\$		0.00	_
		settlement, and property settlement.	80		\$	0.0	_	\$		0.00	_
	8d.	. , .	80		\$_	0.0	_	\$		0.00	_
	8e.	Social Security	86	€.	\$_	0.0	0_	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f		\$	0.0	0	\$		0.00	
	8g.	Pension or retirement income	80	g.	\$_	0.0	0	\$		0.00	
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0.0	0	+ \$		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.0	0	\$		0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10	•		2 511 00	¢	4 40	05 67		2 706 67
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,511.00 +	Ψ_	1,18	95.67	= \$ _	3,706.67
11.	State Included Other	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your en friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep					,	chedule		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	3,706.67
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							Combi month	ned ly income
	_	Yes Explain:									

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EII	in this informs	ation to identify ve				1			
		ation to identify yo	our case.						
Deb	ebtor 1 Michael D Plaminek							f this is:	
	otor 2 ouse, if filing)	Jillian A Plar	ninek				A s		ving postpetition chapter the following date:
Unit	ted States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MN	M / DD / YYYY	
1	se number 								
0	fficial Fo	rm 106J				•			
S	chedule	J: Your l	 Expen	ises					12/1
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ar ch another sheet to this	e filing together, be form. On the top of	oth are eq f any addi	qually tiona	/ responsible fo al pages, write y	or supplying correct your name and case
Par 1.	t 1: Desci Is this a joir	ribe Your House nt case?	hold						
	☐ No. Go to								
	Yes. Doe	es Debtor 2 live i	in a separa	ate household?					
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor	2.	
2.	Do you hay	e dependents?	□ No	•	•				
۷.	Do not list D Debtor 2.	-	■ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter			7 months	□ No ■ Yes □ No
									☐ Yes ☐ No
							_		☐ Yes ☐ No
3.	expenses o	penses include of people other the d your depende	han 🗖	No Yes					☐ Yes
Est	imate your ex	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your exp	enses
4.		or home owners		ses for your residence. r lot.	nclude first mortgage	e 4.	\$		984.00
	If not includ	ded in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		erty, homeowner's				4b.			0.00
		maintenance, re				4c.			100.00
5.		owner's associat		dominium dues o ur residence , such as ho	me equity loans	4d. 5.			0.00

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or 1 Michael D Plaminek Jillian A Plaminek	Case number	(if known)
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	200.00
6b. Water, sewer, garbage collection	6b. \$	58.60
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	490.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	900.00
Childcare and children's education costs	8. \$	400.00
Clothing, laundry, and dry cleaning	9. \$	100.00
Personal care products and services	10. \$	30.00
Medical and dental expenses	11. \$	100.00
Transportation. Include gas, maintenance, bus or train fare.	•	-
Do not include car payments.	12. \$	240.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	40.00
Charitable contributions and religious donations	14. \$	0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	156.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$	0.00
Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	404.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report as		
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	-
Other real property expenses not included in lines 4 or 5 of this form or on School		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify: Pet and veterinary costs	21. +9	75.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.		\$ 4,277.66
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$ 4,277.00
		·
22c. Add line 22a and 22b. The result is your monthly expenses.		\$ 4,277.66
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,706.67
23b. Copy your monthly expenses from line 22c above.	23b\$	
	,	-,
23c. Subtract your monthly expenses from your monthly income.		E70.04
The result is your monthly net income.	23c. \$	-570.99
Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you modification to the terms of your mortgage? □ No.		
Yes. Explain here: Child care is expected to increase.		

Fill in this	s information to identify you	r case:			
Debtor 1	Michael D Plami	inek			
	First Name	Middle Name	Last Name		
Debtor 2	Jillian A Plamin	ek			
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	OT OF ILLINOIS		
Case num	nber				
(if known)				☐ Check if this is a	1
				amended filing	
	Form 106Dec aration About	an Individua	al Debtor's Sche	edules	12/15
	money or property by fraud both. 18 U.S.C. §§ 152, 1341,		nkruptcy case can result in fine	es up to \$250,000, or imprisonment for up	to 20
Did y	you pay or agree to pay som	neone who is NOT an att	corney to help you fill out bankr	ruptcy forms?	
•	No				
	Yes. Name of person			Attach Bankruptcy Petition Preparer's N	
				Declaration, and Signature (Official Form	
				Deciaration, and Oignature (Omeiar For	
	er penalty of perjury, I declar hey are true and correct.	e that I have read the su	ımmary and schedules filed wit	, ,	
that t		e that I have read the su	ımmary and schedules filed wit X /s/ Jillian A Pla	th this declaration and	
that t X <u>/</u> 9	hey are true and correct. s/ Michael D Plaminek Michael D Plaminek	e that I have read the su	X <u>/s/ Jillian A Pla</u> Jillian A Plamii	th this declaration and nminek nek	
that t X <u>/</u> 9	hey are true and correct. s/ Michael D Plaminek	e that I have read the su	X <u>/s/</u> Jillian A Pla	th this declaration and nminek nek	

Fill i	n this inforr	nation to identify your	case:			
Debt	or 1	Michael D Plami	nek			
	_	First Name	Middle Name	Last Name		
Debt (Spou	or 2 se if, filing)	Jillian A Plamine	Middle Name	Last Name		
		nkruptov Court for the	NORTHERN DISTRICT (DE ILLINOIS		
Unite	eu States da	nkruptcy Court for the:	NORTHERN DISTRICT	DF ILLINOIS		
Case (if kno	e number wn)				_	Check if this is an mended filing
Sta	tement			duals Filing for B		4/16
infori numb	mation. If moer (if know	nore space is needed, n). Answer every ques	attach a separate sheet to tion.	this form. On the top of any	equally responsible for sup	
Part			rital Status and Where You	I Lived Before		
1.	What is you	r current marital statu	s?			
	■ Married □ Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you li	ved in the last 3 years. Do no	ot include where you live now		
	Debtor 1 P	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	edule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Expla	in the Sources of You	Income			
l	Fill in the tota	al amount of income you	received from all jobs and a	ng a business during this yeall businesses, including partet together, list it only once ur		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,552.00	■ Wages, commissions, bonuses, tips	\$4,568.10
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 40 of 62 Document Michael D Plaminek Debtor 1 **Jillian A Plaminek** Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$48,000.00 \$8,558.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$50,728.00 \$1,625.00 Wages, commissions. Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For the calendar year before that: Unemployment \$0.00 \$254.00 (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

> □ No. Go to line 7.

> > List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

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Page 41 of 62 Document Michael D Plaminek Debtor 1 Jillian A Plaminek Debtor 2 Case number (if known) **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Nationstar Mortgage LLC Monthly \$984.22 \$2,952.66 \$102,483.00 Mortgage 8950 Cypress Waters Blvd ☐ Car Coppell, TX 75019 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other monthly 404 \$10,884.00 **Bmw Financial Services** \$1,212.00 □ Mortgage **Attn: Bankruptcy Department** Car Po Box 3608 ☐ Credit Card Dublin, OH 43016 ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other_ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Bosanna Plaminek 6147 N Sheridan Chicago, IL 60660	4/7/2016	\$500.00	\$0.00	owed to debtor's grandmother.

Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments to an insider

Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Nature of the case Status of the case Case title Court or agency Case number Capital One Bank USA vs Michael Civil tort 22nd Judicial Circuit Court □ Pending **Plaminek** collection 2200 North Seminary Ave. □ On appeal 15 SC 1407 Woodstock, IL 60098 □ Concluded **Judgment**

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Debtor 1 Michael D Plaminek
Debtor 2 Jillian A Plaminek

Case number (if known)

	Case title Case number	Nature of the case	Court or agency	Status o	of the case
	Midland Funding LLC vs Michael Plaminek 15 SC2128	Civil Tort collection	22nd Judicial Circuit Co 2200 North Seminary Av Woodstock, IL 60098	- FUIL	ppeal
	Cavalry SPV I LLC et al vs Michael Plaminek 15 SC 855	Civil tort collection	22nd Judicial Circuit Co 2200 North Seminary Av Woodstock, IL 60098		ppeal
				judgme	ent
	Capital One Bank vs Michael Plaminek 15 SC 1193	Civil Tort Collection	22nd Judicial Circuit Co 2200 North Seminary Av Woodstock, IL 60098		ppeal
				Judgm	ent for plaintiff
	Nationstar Mortgage LLC vs Michael Plaminek, Jillian Plaminet et al 15 CH 519	Foreclosure	22nd Judicial Circuit Co 2200 North Seminary Av Woodstock, IL 60098		ppeal
				dismis	sed
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		, , , , , , , , , , , , , , , , , , ,	gamonou, anac	
	Creditor Name and Address	Describe the Property Explain what happened	I	Date	Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.	otcy, did any creditor, incl ause you owed a debt?	uding a bank or financial ins	titution, set off a	ny amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action wa taken	s Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possession of an a	ssignee for the k	penefit of creditors, a
	■ No □ Yes				
Par	List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gifts	s with a total value of more th	an \$600 per pers	son?
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	e Value
	Person to Whom You Gave the Gift and Address:				

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Michael D Plaminek

Del	otor 2 Jillian A Plaminek			Case number ((if known)	
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or c			ns with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lot the amount that insurance has paid. Lot color claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property los
Par	t 7: List Certain Payments or Transfers	5		, ,		
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparir	ng a bankruptcy petition?			rty to anyone you
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	'ou	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Newland & Newland, LLP 1512 Artaius Parkway, Ste. 300 Libertyville, IL 60048 steve@newlandlaw.com		Attorney Fees		4/1/2016	\$2,000.00
	Northern Illinois Bankruptcy Court 219 S Dearborn #800 Chicago, IL 60604		Filing fee		4/1/2016 to attorney	\$335.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No	ditors o	r to make payments to your creditor		or transfer any prope	rty to anyone who
	Yes. Fill in the details.				_	
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	transferred in the ordinary course of you Include both outright transfers and transfers include gifts and transfers that you have alr	ir busin made a	ess or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.		December 2011	D		Data tan
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made

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Debtor 1 Michael D Plaminek
Debtor 2 Jillian A Plaminek

Case number (if known)

	Person Who Received Transfer Address Person's relationship to you	Description and va property transferr		payme	pe any property or nts received or debts exchange	Date transfer was made
	Matt Kauffman 470 Adam, Street Tiskilwa, IL 61368 None-Craigslist	2005 Toyota Prid Hatchback with needed main ba replaced.	171,228	\$2,000		February 5, 2016
	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		y property to a s	elf-settled	trust or similar device o	f which you are a
	Name of trust	Description and va	alue of the prop	erty transf	erred	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	rage Units		made
	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated No □ Yes. Fill in the details.	other financial accoun	nts; certificates o	of deposit;		
		ast 4 digits of account number	Type of accourtinstrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, any	/ safe depo	osit box or other deposit	eory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)		Describe t	ne contents	Do you still have it?
22.	Have you stored property in a storage unit or p ■ No □ Yes. Fill in the details.	place other than your	home within 1 y	ear before	you filed for bankrupte	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe t	ne contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else				
	Do you hold or control any property that some for someone.	one else owns? Inclu	ide any property	you borro	owed from, are storing fo	or, or hold in trust
	□ No■ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe t	ne property	Value

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Debtor 1 Michael D Plaminek
Debtor 2 Jillian A Plaminek

Case number (if known)

	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	De	scribe the property	value	
	Michael Plaminek Huntley, IL 60142	In debtor's possession	11 De in int de	03 Nissan Pathfinder with 1,000 miles owned by botor's father and currently use by debtors. Father's ent is to gift this vehicle to btor but is titled in father's me at time of filing.	\$2,000.00	
Par	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, grour	_	• •		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa Hazardous material means anything an environment of the state of the stat	ıl sites. nmental law defines as a hazardou				
Dan	hazardous material, pollutant, contaminant, or		am 4laa			
•	ort all notices, releases, and proceedings that y	, •		•	a antal lavv	
24.	Has any governmental unit notified you that you	ou may be liable or potentially liable	ie und	der or in violation of an environm	ientai iaw ?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of an	y release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or admin	istrative proceeding under any en	vironi	mental law? Include settlements	and orders.	
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	t 11: Give Details About Your Business or Co	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy,	, did you own a business or have a	ny of	the following connections to an	ny business?	
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	y, eith	er full-time or part-time		
	☐ A member of a limited liability compan	y (LLC) or limited liability partners	hip (L	.LP)		
	☐ A partner in a partnership					
	☐ An officer, director, or managing execu	utive of a corporation				
	☐ An owner of at least 5% of the voting o	☐ An owner of at least 5% of the voting or equity securities of a corporation				

Case 16-81001 Doc 1 Filed 04/22/16 Entered 04/22/16 17:18:40 Desc Main Page 46 of 62 Document Michael D Plaminek Debtor 1 **Jillian A Plaminek** Debtor 2 Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jillian A Plaminek /s/ Michael D Plaminek Michael D Plaminek Jillian A Plaminek Signature of Debtor 1 Signature of Debtor 2 Date April 22, 2016 Date April 22, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

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Fill in this infor	rmation to identify your ca	se:		
Debtor 1	Michael D Plaminek			
Debtor 2	First Name Jillian A Plaminek	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo		for Indiv	viduals Filing Under Chapte	e r 7 12/15
	dividual filing under chapte ve claims secured by your	-	Il out this form if:	
■ you have lea You must file th	ased personal property and his form with the court with never is earlier, unless the o	I the lease has n nin 30 days after	oot expired. you file your bankruptcy petition or by the date se e time for cause. You must also send copies to the	
	people are filing together in and date the form.	a joint case, bo	oth are equally responsible for supplying correct in	nformation. Both debtors must
	and accurate as possible. your name and case numb		s needed, attach a separate sheet to this form. On	the top of any additional pages,
1. For any credi			e: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information b Identify the c	pelow. reditor and the property that	is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's I	Bmw Financial Services	;	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
property	of 2012 Mini Cooper S !	52000 miles	Retain the property and enter into a Reaffirmation Agreement.Retain the property and [explain]:	■ Yes
securing debt	r:			
Creditor's ,	Joseph F Antolak DDS		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description o	of Necessary Dental Se		Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	statement of intention		■ Retain the property and [explain]: Necessary dental work done on eve of BK filing, debtor to reaffirm	_
Creditor's	Nationstar Mortgage LL	C	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	■ V
Description o	of 404 Plum Street Lake	in the	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes

Official Form 108

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Debto Debto			ael D Plaminek n A Plaminek	Case number (if	known)
•	perty	debt:	Hills, IL 60156 McHenry County Zillow value \$139K and Assessor Value \$90,290.	Retain the property and [explain]:	
			Debtors believe, based on local sales and listings that property would not exceed \$100,000.	Retain and pay as agreed. Account current	
Part 2	L	ist Yo	ur Unexpired Personal Property Leases		
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).					
Descr	ribe y	our ur	nexpired personal property leases		Will the lease be assumed?
Lesso	r's na	ame:	Banfeld Veterinary		■ No
					☐ Yes
Description of leased Property: Veterinary plan at \$65/month through March 2017 Part 3: Sign Below					
rarro		J.g., D.			
			perjury, I declare that I have indicated my ubject to an unexpired lease.	intention about any property of my estate th	nat secures a debt and any personal
x /	s/ Mi	ichael	D Plaminek	X /s/ Jillian A Plaminek	
1	Mich	ael D	Plaminek	Jillian A Plaminek	
5	Signa	ture of	Debtor 1	Signature of Debtor 2	
	Date	Aŗ	oril 22, 2016	Date April 22, 2016	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81001 Doc 1 Filed 04/22/16 Entered 04/22/16 17:18:40 Desc Main Document Page 53 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	re	Michael D Pla Jillian A Plam		k				Case No.		
	-	•				Debtor(s)		Chapter	7	
		DIS	CLO	OSURE OF COM	MPENSAT	ION OF ATT	ORNEY F	OR DE	EBTOR(S)	
1.	con	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that impensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
		For legal servic	es, I h	ave agreed to accept			\$		2,000.00	<u>-</u>
		Prior to the filin	g of th	his statement I have rec					2,000.00	<u> </u>
		Balance Due					\$		0.00	<u> </u>
2.	\$	335.00 of the	filing	fee has been paid.						
3.	The	e source of the co	mpens	sation paid to me was:						
		Debtor		Other (specify):						
4.	The	source of compe	ensatio	on to be paid to me is:						
		Debtor		Other (specify):						
5.	•	I have not agreed	d to sh	are the above-disclose	d compensation	with any other pers	son unless they	are mem	bers and associ	ates of my law firm.
				the above-disclosed co , together with a list of						f my law firm. A
6.	In	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	b. с.	Preparation and f Representation of [Other provisions Negotiation	iling of the design as new ons w	s financial situation, an of any petition, schedul ebtor at the meeting of eded] with secured credito greements and app	les, statement of f creditors and cors to reduce to	f affairs and plan wl onfirmation hearing to market value;	hich may be reg, and any adjo	quired; ourned hea olanning;	rings thereof;	and filing of
7.	Ву	Represen motions p	tation oursu	otor(s), the above-discle n of the debtors in a ant to 11 USC 522(f rsary proceeding	any discharge	ability actions, j	udicial lien a	voidanc d goods	es, preparati , relief from s	on and filing of stay actions or
					CER	TIFICATION				
thi		rtify that the fore cruptcy proceeding		is a complete statemen	nt of any agreen	nent or arrangement	t for payment t	o me for r	epresentation o	f the debtor(s) in
	Apri	I 22, 2016				/s/ Stephen S.	Newland			
	Date				_	Stephen S. Ne		158		
						Signature of Atta Newland & Ne				
						1512 Artaius F	Parkway, Ste	. 300		
						Libertyville, IL (847) 549-0000		549-1901)	
						steve@newlar				
						Name of law firm	n			<u></u>

Main Offices:

Libertyville Office: 1512 Artaius Parkway, Suite 300 Libertyville, Illinois 60048 Office: 847.549.0000 Fax: 847.557.1427

Arlington Heights Office: 121 S Wilke Road, Suite 301 Arlington Heights, Illinois 60005 Office: 847.797.8001

Fax: 847.797.9090

Newland & Newland, LLP

Arlington Heights . Libertyville . Crystal Lake . Waukegan . Itasca

00

Bankruptcy Retainer Agreement OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to undersigned Client(s), ("Client") by Attorney, Newland & Newland, LLP, ("Attorney"), in connection with representing Client regarding bankruptcy matters, Client, jointly and severally, it is agreed as follows:

FEES AND CHARGES FOR SERVICES AND TERMS OF PAYMENT

- 1. **RETAINER REQUIREMENT:** Attorney accepts payment plans. An initial payment of \$\frac{250}{250}\$ is required at the time this Retainer Agreement is signed. The Retainer shall be applied to the balance owed and shall not be an additional fee. Client shall make monthly payments until paid in full.
- 2. INITIAL RETAINER PAYMENT: A payment of \$\frac{2335.}{2335.}\ was paid on April | \frac{20(4)}{20(4)}\. Client nuderstands that Attorney requires payment in full, including the court filing fee, prior to preparing Client's Bankruptcy Petition and filing same with the court.
- 3. REQUIRED ONLINE CLASSES: Client is required to complete a law mandated pre-bankruptcy CREDIT COUNSELTING course and pre-discharge DEBTOR EDUCATION course. Client is free to choose any provider approved by the United States Department of Justice. Attorney works with an approved provider, (DECAF). You can access this provider at www.newlandlaw.com/bankruptcy. Client is responsible for payment for both courses of \$15 each (for the online version. Phone courses are \$35). Joint debtors will take the courses together and one fee covers both. "CREDIT COUNSELING" class must be completed before case can be filed and "DEBTOR EDUCATION" course must be completed prior to the Trustee hearing. Failure to complete the "DEBTOR EDUCATION" course before hearing date will subject client to additional fees of \$250 if the case is closed without discharge in any circumstance.
- 4. **RETAINER TYPE:** Client acknowledges Attorney has explained the different types of retainers and based on that discussion Client, who has the sole right to decide the type of retainer has agreed the retainer shall be:
- a. A security retainer, where the funds are deposited into the Attorney's escrow account, without interest. Attorney shall provide client a billing statement when funds are drawn out of the account.
- b. An advance payment retainer, where the retainer is deposited directly into Attorney's business account and is considered the property of the Attorney. It is understood that this option is for Client's benefit as it is not subject to attachment by creditors.
- 5. **BUSINESS ATTACHMENT:** If Client's income is from the operation of a business or as an independent contractor (1099), Attorney requires payment of a fee for preparation of a Business Attachment.

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- 6. **CONDITIONS FOR PREPARATION:** Client understands that when Attorney is paid in full **and** Client has provided Attorney will all required forms and documents, Attorney will begin preparation of Client's petition.
- 7. **POST FILING CREDITOR DATA:** Client understands that if after Client's Bankruptcy Petition is filed, Client notifies Attorney of a debt or any other information that was that was omitted by Client, Client agrees to pay Attorney \$100.00 for each amendment to Client's Bankruptcy Petition plus any costs charged by the Court.
- 8. **RETURNED CHECK:** Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash or certified funds.

Client's Schedule of Fees and Costs

•	Attorney Fee for Preparation and Representation of Chapter 7 Case:	\$_	2000-
•	Filing Fee (Chapter 7):	\$_	335.00
•	Business Attachment:	\$_	
•	Reaffirmation Agreement(s): \$100 each agreement	\$_	
•	Other costs: credit reports, courier fees, return of documents to client and other direct expenses	\$	_85.00
	TOTAL:	\$_	2335.00

TERMS OF SERVICE

- 9. ATTORNEY WITHDRAWAL: Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same.
- 10. NO PROMISE OR GUARANTEE: Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 11. **RECORDS POLICY:** Client will have 30 days following discharge to arrange collection of documents. After 30 days, non-essential (bill statements etc.) or easily reproduced documents will be shredded. Any essential documents (tax returns, foreclosure data etc.) as well as Newland and Newland work product will be preserved. Client agrees that Attorney may discard any and all Client records following one (1) year of the completion of the Client's bankruptcy case.
- 12. **SERVICES INCLUDED:** Attorney shall provide Client with the following services:
 - a. Review and analyze Clients financial circumstances based on information provided by Client.
 - b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Clients options, including but not limited to bankruptcy options.

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- c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
- d. Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing.
- e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the Attorneys service relative to providing bankruptcy assistance or other legal services to Client.
- f. Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include all typical Attorney required participation in such proceeding, including but not limited to, appearance at Client's 341 Meeting of Creditors, communications with Client's case trustee as well as the US Trustee, and communication with creditors, when appropriate.
- g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided. Attorney's hourly rate for non-customary work is \$300 for attorney time and \$150 hourly for paralegal time.
- h. Attorney will utilize paralegal support in the collection of data and preparation of the petition. Paralegals can address most issues related to the filing on an informational basis and can explain processes but cannot give specific advice applying the law to your situation. Attorney may utilize an outside paralegal service for assistance in preparation of petitions and attorney will notify client when outside services are being utilized. Client agrees to cooperate with contracted paralegals in the same manner as in-house employees of Newland and Newland, LLP.
- 13. **FULL DISCLOSURE:** Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.
- 14. SCOPE OF REPRESENTATION: Client acknowledges that, on the basis of this agreement, Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The Attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Clients bankruptcy proceedings, and to suggest to another court that Clients proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the Attorney of a pending lawsuit does not obligate the Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another Attorney to represent Client is a courtesy only. The Attorney is not associated with any other Attorney outside of the undersigned Attorneys law offices.
- 15. **CLIENT'S RESPONSIBILITY FOR DATA:** Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to the Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability.
- 16. SERVICES NOT INCLUDED: Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Clients behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
 - Motions to revoke a discharge.

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 - b. Removal of a pending action in another court.
 - c. Obtaining title reports.
 - d. The determination of real estate or tax liens.
 - e. Appeals to the District Court of Court of Appeals.
 - f. Correcting credit reports.
 - g. Negotiations with Check Systems regarding Client.
 - h. Motions to Discuss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
 - i. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargability of debts.
 - j. Negotiating reaffirmation agreements when Clients income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
 - k. Motions to redeem personal property.
 - I. Motion to impose or extend the bankruptcy stay.
 - 17. LIENS. A Bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Clients statements concerning ownership of real property and any liens attached to Clients real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Clients wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients real estate.
 - 18. AUDITS: Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate, listed in 12(g) above, for representing Client in such audit. Such audits generally cost \$500 or less although a difficult case can exceed that amount.
 - 19. **COVERAGE:** Due to scheduling and distance issues, Attorney may have an attorney outside of Attorney's firm attend the Client's Creditors/Trustee Hearing (341 meeting). These attorneys appear as an extension of Newland and Newland and Client consents to said action. The cost of this <u>is included</u> in the basic bankruptcy fee. However, if a hearing is continued due to clients failure to appear, a \$100 charge will be made for the rescheduled hearing.
 - 20. **POST FILING DOCUMENT REQUESTS:** Request for documentation or copies of court documents more than 90 days after discharge will be available for a \$25 service fee. These are sometimes needed. It is recommended you keep your documents safe and accessible.

The undersigned acknowledges agreement with the terms of the Bankruptcy Retainer Agreement.

Dated: April 1, 2016

☐ Single Filing

₩ Joint filing

Client Signature

Client Spouse Signature

Client Spauce Printed Name

Attorney at Law for Newland and Newland, LLP

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United States Bankruptcy Court Northern District of Illinois

In re	Michael D Plaminek Jillian A Plaminek		Case No.				
		Debtor(s)	Chapter	7			
	VE	RIFICATION OF CREDITOR M	ATRIX				
	Number of Creditors: 3						
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and	correct to the best of my			
Date:	April 22, 2016	/s/ Michael D Plaminek					
		Michael D Plaminek					
		Signature of Debtor					
Date:	April 22, 2016	/s/ Jillian A Plaminek					
		Jillian A Plaminek					
		Signature of Debtor					

Advocate Good Shepard Hospital 450 West Hwy 22 Barrington, IL 60010

Advocate Medical Group 701 Lee St. Des Plaines, IL 60016

Banfeld Veterinary 4465 US Hwy 14 Crystal Lake, IL 60014

Blatt Hasenmiller Leibsker & Moore 125 S. Wacker Dr., Ste. 400 Chicago, IL 60606

Blitt & Gaines, P.C. 661 W. Glenn Ave. Wheeling, IL 60090

Bmw Financial Services Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016

Calvary Portfolio Services 500 Summit Lake Dr Ste 400 Valhalla, NY 10595

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Carecr/gemb ATTN: Bankruptcy PO Box 103104 Roswell, GA 30076

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364 Central Credit Services PO Box 15118 Jacksonville, FL 32239-5118

Codilis & Associates, PC 15W030 North Frontage Rd. Suite 100 Burr Ridge, IL 60527

Creditors Protection S Po Box 4115 Rockford, IL 61101

Dr Luda M Sorin 1675 Dempster Street 3rd floor Park Ridge, IL 60068

ICS PO Box 1010 Tinley Park, IL 60477

Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

Joseph F Antolak DDS 370 Liberty Road Crystal Lake, IL 60014

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Lutheran General Hospital % Healthport PO Box 409900 Atlanta, GA 30384-9900

Malcom S. Gerald and Assoc., Inc. 332 South Michigan Ave., Ste. 600 Chicago, IL 60604

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

MIRA Med Revenue Sept. 77304 PO Box 7700 Detroit, MI 48277

Moraine ER Physicians PO Box 8759 Philadelphia, PA 19101

Nationstar Mortgage LLC 8950 Cypress Waters Blvd Coppell, TX 75019

Personal Finance/p312 1022 S. Mclean Blvd Elgin, IL 60123

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

QCS POB 4699 Petaluma, CA 94955

Shindler Law 1990 East Algonquin Road - Suite 18 Schaumburg, IL 60173 State Collection Service 2509 S Stoughton Rd Madison, WI 53716

TSI Po Box 15630 Wilmington, DE 19850

Wellington Radiology 9410 Compubill Dr. Orland Park, IL 60462